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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/783,811
		Filing Date	February 19, 2004
		First Named Inventor	Terrence BUELNA
		Art Unit	Not Yet Assigned
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	6	Attorney Docket Number	506512000801

ENCLOSURES (Check all that apply)

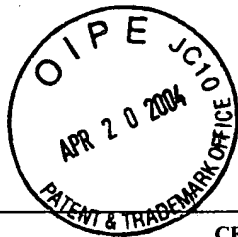
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement and PTO Form 1449 - 5 pages <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Return receipt postcard.
<div style="border: 1px solid black; padding: 5px; min-height: 100px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	MORRISON & FOERSTER LLP (Customer No. 20872) Cameron A. King - 41,897
Signature	<i>Cameron A. King</i>
Date	<i>April 15, 2004</i>

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 4/15/04 Signature: *Victoria A. Wilson* (Victoria A. Wilson)



PATENT
Docket No. 506512000801

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Victoria Wilson
Victoria Wilson

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Terrence BUELNA et al.

Serial No.: 10/783,811

Filing Date: February 19, 2004

For: SURGICAL CLAMP PADS HAVING
SURFACE OVERLAY

Examiner: Not Yet Assigned

Group Art Unit: Not Yet Assigned

INFORMATION DISCLOSURE
STATEMENT UNDER 37 C.F.R. § 1.97

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO-1449. Copies of the documents marked with an asterisk (*) were previously submitted in Information Disclosure Statements and/or Office Actions, directed to the related applications Serial Number 09/645,458 filed August 24, 2000, and, accordingly, copies are not included herewith. This protocol conforms with 37 C.F.R. § 1.98(d) and M.P.E.P. 609(A)(2). The Examiner is requested to make these documents of record in the application.

This Information Disclosure Statement is submitted:

- ☒ **Within three months of the application filing date or before mailing of a first Office Action on the merits; accordingly, no fee or separate requirements are required.**
- ☐ After receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance.
 - ☐ A fee is required. A check in the amount of * is enclosed.
 - ☐ A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
 - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below; accordingly, no fee is believed to be due.
- ☐ After mailing of a final Office Action or Notice of Allowance, but before payment of the issue fee.
 - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below and a check in the amount of * is enclosed.
 - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below and a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

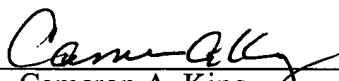
Applicants would appreciate the Examiner initialing and returning the Form PTO-1449, indicating that the information has been considered and made of record herein.

The information contained in this Information Disclosure Statement under 37 C.F.R. § 1.97 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal letter is separated from this document and the Patent Office determines that an extension and/or other relief is required, applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to Deposit Account No. 03-1952 referencing 506512000801. However, the Commissioner is not authorized to charge the cost of the issue fee to the Deposit Account.

Dated: April 15, 2004

Respectfully submitted,

By: 
Cameron A. King
Registration No. 41,897

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Form PTO-1449 INFORMATION DISCLOSURE CITATION IN AN APPLICATION <i>(Use several sheets if necessary)</i>	Docket Number 506512000801	Application Number 10/783,811
	Applicant Terrence BUELNA et al.	
	Filing Date February 19, 2004	Group Art Unit Not Yet Assigned
	Mailing Date April 15, 2004	

U.S. PATENT DOCUMENTS

Examiner Initials	Ref. No.	Date	Document No.	Name	Class	Subclass	Filing Date If Appropriate
	1.	5/1/56	*2,743,726	H. R. Grieshaber			
	2.	3/31/70	*3,503,396	Pierie et al.			
	3.	3/31/70	*3,503,397	Fogarty et al.			
	4.	3/31/70	*3,503,398	Fogarty et al.			
	5.	5/23/72	*3,663,973	Spence			
	6.	3/13/73	*3,719,963	Bullock, Jr.			
	7.	7/17/73	*3,746,002	Haller			
	8.	5/13/75	*3,882,855	Schulte et al.			
	9.	11/23/76	*3,993,076	Fogarty			
	10.	4/29/75	*3,880,166	Fogarty			
	11.	10/22/85	*4,548,202	Duncan			
	12.	9/16/86	*4,611,593	Fogarty et al.			
	13.	4/18/89	*4,821,719	Fogarty			
	14.	9/11/90	*4,955,897	Ship			
	15.	12/15/92	*5,171,253	Klieman			
	16.	7/16/96	*5,535,756	Parasher			
	17.	1/7/97	*5,591,182	Johnson			
	18.	12/28/99	*6,007,552	Fogarty et al.			
	19.	4/13/99	*5,893,878	Pierce			
	20.	3/17/98	*5,728,121	Bimbo et al.			
	21.	3/27/01	*6,206,896 B1	Howell et al.			
	22.	10/25/94	*5,358,510	Luscombe et al.			
	23.	8/6/91	*5,036,733	Tiholiz et al.			
	24.	5/08/01	*6,228,104 B1	Fogarty et al.			

EXAMINER:

DATE CONSIDERED:

EXAMINER: Initial if citation considered, whether or not the citation conforms with MPEP 609. Draw a line through the citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.

Form PTO-1449 INFORMATION DISCLOSURE CITATION IN AN APPLICATION <i>(Use several sheets if necessary)</i>	Docket Number 506512000801	Application Number 10/783,811
	Applicant Terrence BUELNA et al.	
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FOREIGN PATENT DOCUMENTS

Examiner Initials	Ref. No.	Date	Document No.	Country	Class	Subclass	Translation YES NO	
	25.	6/17/92	*0 490 301 A1	EPO				
	26.	8/4/13	*65626	Switzerland				X
	27.	8/6/98	*WO 98/33437	PCT				
	28.	3/11/99	*WO 99/11179	PCT				
	29.	6/24/99	*WO 99/30623	PCT				
	30.	12/28/00	*WO 00/78235	PCT				

OTHER DOCUMENTS*(including author, title, Date, Pertinent Pages, Etc.)*

Examiner Initials	Ref. No.	Title
	31.	*Applied Medical Ressources, "A-Trac Atraumatic Clamping system", product description, 2 pgs.

EXAMINER:**DATE CONSIDERED:**

EXAMINER: Initial if citation considered, whether or not the citation conforms with MPEP 609. Draw a line through the citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.